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## BIB DATA SHEET

CONFIRMATION NO. 5674

|  |   |  |                                 |  |                           |                                |
|--|---|--|---------------------------------|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/789,437   | <b>FILING or 371(c)<br/>DATE</b><br>02/26/2004<br><b>RULE</b>   | <b>CLASS</b><br>379                                      | <b>GROUP ART UNIT</b><br>2614   | <b>ATTORNEY DOCKET NO.</b><br>CALLACI.001CP1                 |                           |                                |
| <b>APPLICANTS</b><br>John W. Callaci, Diamond Bar, CA;<br><b>** CONTINUING DATA *****</b><br>This application is a CIP of 09/927,132 08/10/2001 PAT 6,700,601<br>which claims benefit of 60/224,254 08/10/2000<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>05/18/2004 |   |  |                                 |  |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <u>/STELLA L. WOO/</u><br>Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>CA   | <b>SHEETS DRAWINGS</b><br>17                                 | <b>TOTAL CLAIMS</b><br>39 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>KNOBBE MARTENS OLSON & BEAR LLP<br>2040 MAIN STREET<br>FOURTEENTH FLOOR<br>IRVINE, CA 92614<br>UNITED STATES   |   |  |                                 |  |                           |                                |
| <b>TITLE</b><br>Method and apparatus for video communication over a limited bandwidth medium   |   |  |                                 |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>1292   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                 | <input type="checkbox"/> All Fees                            |                           |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.16 Fees (Filing)                  |                           |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                           |                                |
|  |   |  |                                 | <input type="checkbox"/> 1.18 Fees (Issue)                   |                           |                                |
|  |   |  |                                 | <input type="checkbox"/> Other _____                         |                           |                                |
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